U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



3. Name and address of person filing.

Name Edwin C Wright

1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 /

Name Ironworkers Local 7

4. Name, file number, and address of labor organization.

потивания потивностью по потивностью	
	Labor Organization File Number 033-092
P.O. Box, Bldg., Room No., if any P.O. Box 7	P.O. Box, Building and Room Number, if any P.O. Box 7
Street 195 Old Colony Avenue	Street 195 Old Colony Avenue
City South Boston	City South Boston
State Massachusetts ZIP Code + 4 02127	State Massachusetts ZIP Code + 4 02127
5. Position in labor organization. Business Agent	
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the excli- 	usions set forth in the instructions): derived income or other economic benefit of
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City (
State ZIP Code + 4	,
Sigr	nature Edylin G. Wyaht
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	ying documents), has been examined by the signatory and is, to the best of the ection on penalties in the instructions.)
Signed Colling 6. What	On 8/11/2005 (617) 268-7575 Date Telephone Number
Form LM-30 (2003)	Page 1 of 8

Name of Person Filing Edwin Wright	File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Iron Workers District Council LMCT Trade Name, if any:	9. Business deals with: a. Labor Organization
P.O. Box, Bldg., Room No., if any P.O. Box 96 Street 191 Old Colony Avenue	b. Trust c. Employer
City South Boston State Massachusetts ZIP Code + 4 02127	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Iron Workers District Council LMCT is a Taft-Hartley Trust that is funded from contributions made pursuant to collective bargaining agreements between
Trade Name, if any:	Iron Workers Local 7 and various signatory construction employers.
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Meeting related travel, meals and lodging.
	12.b. Amount. \$1,258
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing Edwin	Wright	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Local 7 Apprentice Training Committee	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 191 Old Colony Avenue	c. Employer	
City South Boston		
State Massachusetts ZIP Code + 4 02127		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	Marine Andrew
Name	Local 7 Apprentice Training Commit Hartley Trust that is funded from	contributions
Trade Name, if any:	made pursuant to collective bargai between Iron Workers Local 7 and v construction employers.	ning agreements arious
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
State Council and the Council and Council	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	i konsularen besupaka era manken antera keri keri terkina meri kiriki nazar ipadi keri poliktis baker baldi
	Meeting related lodging.	
	12.b. Amount.	\$599

Name of Person Filing Edwin	Wright	File Number U-
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O Nicola de la Contraction de	9. Business deals with:	
Name and address of Business (including trade name, if any).	c. Susmoss usale with.	
Name Iron Workers District Council H&W Fund	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 161 Granite Avenue	c. Employer	
City Dorchester		
State Massachusetts ZIP Code + 4 02124		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Iron Workers District Council H&W Fund is Hartley Trust that is funded from contribumade pursuant to industry collective barga	ıtions
Trade Name, if any:	agreements including agreements between Ir	ron
P.O. Box, Bldg., Room No., if any	Workers Local 7 and various signatory consemployers.	acruction
Street		
Out Get		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Meeting related travel, lodging and meals.	
	12.b. Amount.	\$1,826

Name of Person Filing $ \underline{\tt Edwin} $	Wright	File Number U-
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O Norman de deles estados esta	9. Business deals with:	
Name and address of Business (including trade name, if any).	or pasinoso dodie initrii	
Name Freedom Capital Management	a. Labor Organization	
Trade Name, if any:	STATE OF STA	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street One Beacon Street	c. Employer	
City Boston		
State Massachusetts ZIP Code + 4 02108		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council Pension Fund	Freedom Capital is an investment m	anagement company Workers District
Trade Name, if any:	Council Pension Fund.	
P.O. Box, Bldg., Room No., if any		
Street 161 Granite Avenue		
City Dorchester		
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	- NOTEN HERBOOT A SUB-PROPRIES A PLACE SOURCE OF MEMBERS AND A SUB-PROPRIES AND A SUB-PRO
	Meeting related meal.	
		Strategican ware automated and the early and traditioned right per deposit a basic and the calcular deposition by the depolar
	12.b. Amount.	\$65

Name of Person	Filing	Edwin	Wright

File Number U-

Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name James M. Langan, Jr.	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 33 Broad Street	c. Employer	
City Boston		
State Massachusetts ZIP Code + 4 02109		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council H&W Fund	Mr. Langan is the attorney for Taf Funds that are associated with Iro	t-Hartley Trust on Workers Local
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 161 Granite Avenue		
City Dorchester		
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	никомучення применення реализация при на
	Meeting related meal.	
	12.b. Amount.	\$78

Name of Person Filing Edwin Wright File Nu	Number U-
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8. Name and address of Business (including trade name, if any). Name NCPPO Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 6850 Versar Center City Springfield State Virginia ZIP Code + 4 22151	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council H&W Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 161 Granite Avenue City Dorchester	NCPPO is a vendor that provides he services. NCPPO solicited busines Workers District Council H&W Fund.	s from Iron
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Meeting related meal.	
	12.b. Amount.	\$72

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Boston Partners	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 28 State Street	c. Employer	
City Boston		
State Massachusetts ZIP Code + 4 02109		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council H&W Fund	Boston Partners is an investment management company that solicited business from Taft-Hartley Trust Funds that are associated with Iron Workers Local 7.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		Management of the Parket
Street 161 Granite Avenue		
City Dorchester		
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.	Designation
	12.a. Nature of interest held or income received.	7775
	Meeting related meal:	A CONTRACTOR OF THE PROPERTY O
	12.b. Amount. \$3	5